

REQUEST FOR PROPOSAL

Addendum # 1



Department Of Executive Services
Finance and Business Operations Division
Procurement and Contract Services Section
206-684-1681 TTY RELAY: 711

ADDENDUM DATE: August 16, 2005

RFP Title: **King County Medical and RX Programs**

RFP Number: **05-006 OB and 05-007 OB**

Due Date/Time: **September 13, 2005- 2:00 P.M.**

Buyer: **Ovita Bonadie, ovita.bonadie@metrokc.gov, 206-684-1055**

This Request for Proposal Addendum will be provided in alternative formats such as Braille, large print, audiocassette or computer disk for individuals with disabilities upon request.

**To Prospective Proposers
Request for Proposals 05-006 and 05-007
Questions and Answers**

1. *DBE Requirements (page 31) described in Section 1.*
Will be discussed at Pre Proposal meeting.
2. *Please confirm if specialty drugs will be included in the pharmacy benefit.*
**Yes, King County intends to cover specialty medications as part of the pharmacy benefit.
To avoid any confusion regarding provision of specialty pharmacy services, vendors should carefully review all proposal specifications– specifically the consent that a vendor's financial offer cannot be contingent on receiving exclusive pharmacy provider status.**
3. *Is it mandatory that we emulate WA State PDL?*
It is not mandatory to emulate the branded medications on the WA State PDL in the proposed formulary. However, vendors must exemplify how they develop and maintain a evidence-based formulary program that satisfactorily meets the goals and objectives of King County.
4. *Can we submit questions after the Bidder's Conference if we submit the Intent to Bid early?*
Last questions are due in writing by August 25th.
5. *Is it possible to reconcile performance guarantees annually, not quarterly?*
King County prefers performance guarantee results to be reported quarterly with annual payment.
6. *Please describe any studies or programs that your organization has conducted similar to the Pitney Bowes program that eliminates prescription drug copays for certain chronic diseases. Please provide additional background on this program.*
Pitney Bowes covers prescription drugs for asthma, diabetes and hypertension at tier 1 to address non-compliance with medications associated with these chronic conditions. There are several articles that provide background on the Pitney Bowes prescription drug plan. The following is one link to a relevant article.

http://www.ajmc.com/files/articlefiles/A128_05augMahoneyS170to176.pdf

7. *Provide the range of behavioral health utilization that you anticipate for this account under the current plan design found in Appendix B and under a full parity plan design. Please explain the difference between the current design and "full parity."*

Full parity means that behavioral health services are covered the same as other medical services; there are no additional limits imposed on behavioral health services other than the limits for general medical services.

8. *Would it be possible to get the following information?*

- *Monthly claims experience by plan for the past three years*
- *Large claims experience*
- *Census data including dependent status*
- *Enrollment history by plan for the past three years*
- *Utilization data for prior years*
- *Utilization data broken out by plan*

It is possible, but will not be provided as we don't think that this information is required to provide a competitive quote.

9. *Your request says that you will be offering a PPO plan and an HMO plan. However, your request includes a PPO network and a High Performance Network. Please clarify how these networks will be incorporated into your offering.*

The County will offer a PPO plan with a high performance network on a passive basis (i.e. there will not be an incentive to use the high performance network).

10. *Question 20.42 – Please clarify your request for 80 hours of ad-hoc report requests. Does this mean that we provide 80 hours of programming time in our administration fees?*

King County expects the vendor to provide ad-hoc reporting. Please include at a minimum 80 hours of programming costs cost for ad hoc reporting in your administration fees.

11. *Are questions 184-188 only in regards to the Nurse Advise Line?*

Yes

12. *Why is the County out to bid?*

There are two reasons for this RFP – 1) County ordinances set a maximum length for contracts and require periodic re-bidding; 2) the County is implementing a new health plan that includes a number of new features and services that must be provided by the medical TPA and PBM vendors.

13. *Is the County satisfied with current services provided by the incumbent insurance carrier?*

As noted above, the reason for the medical TPA and PBM RFP's is due to County purchasing requirements and the need to add a number of new services to support the Healthy Incentives Plan design. The County has been generally happy with the performance of the incumbent vendors.

14. *What specifically does the County like about the current insurance carrier's services?*

The County is particularly happy with the data integration and analysis capabilities of the medical TPA. Further, the County specifically likes the responsiveness of the customer service that is provided by the current medical TPA.

15. *Please summarize the on-line enrollment and web capabilities currently provided to the County.*

The County is currently in the process of implementing a PeopleSoft on-line enrollment tool called eBenefits and a PeopleSoft web portal tool.

16. *What firm/who is the current health plan consultant for the County?*

Mercer Human Resource Consulting

ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME